

## Legislative Council Staff

Nonpartisan Services for Colorado's Legislature

## **Fiscal Note**

Drafting Number:LLS 22-0603Date:February 1, 2022Prime Sponsors:Sen. RodriguezBill Status:Senate Business

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| Bill Topic:               | PROVIDER TOOL TO VIEW ALL-PAYER CLAIMS DATABASE  |   |  |
|---------------------------|--|---|--|
| Summary of Fiscal Impact: | <ul><li>□ State Revenue</li><li>⋈ State Expenditure</li><li>□ State Transfer</li></ul>                                 | <ul><li>□ TABOR Refund</li><li>□ Local Government</li><li>□ Statutory Public Entity</li></ul>   |  |
|                           | facilitate the review of certain   | Claims Database administrator to implement a tool to health claims reimbursement data that are included in tate expenditures on an ongoing basis beginning in |  |
| Appropriation Summary:    | For FY 2022-23, the bill requires an appropriation of \$140,175 to the Department of Health Care Policy and Financing. |   |  |
| Fiscal Note<br>Status:    | The fiscal note reflects the introduced bill.  |   |  |

# Table 1 State Fiscal Impacts Under SB 22-068

|                      |                      | Budget Year<br>FY 2022-23 | Out Year<br>FY 2023-24 |
|----------------------|----------------------|---------------------------|------------------------|
| Revenue              |                      | -                         | -                      |
| Expenditures         | General Fund         | \$140,175                 | \$40,500               |
| Transfers            |                      | -                         | -                      |
| Other Budget Impacts | General Fund Reserve | \$21,026                  | \$6,075                |

#### **Summary of Legislation**

By January 1, 2023, the bill requires the All-Payer Claims Database administrator to implement a tool to facilitate the review of certain health claims reimbursement data that are included in the database, and update the tool annually subject to available appropriations.

#### **Background**

The All-Payer Claims Database is a comprehensive database of health care claims across all Colorado health insurance carriers, including Medicaid, Medicare, and commercial payers. The data collected include diagnosis, service, and reimbursement information. The database provides data and analytics to a variety of stakeholders, including state and local government entities, academic institutions, researchers, health care providers, nonprofit health focused entities, employer groups, and health technology companies. The All-Payer Claims Database administrator is the Center for Improving Value in Health Care (CIVHC), a nonprofit that collaborates with the state and other stakeholders including the CIVHC Board of Directors, the Colorado All-Payer Claims Database Advisory Committee, and the Data Release Review Committee.

#### **State Expenditures**

The bill increases state expenditures in the Department of Health Care Policy and Financing by \$140,175 in FY 2022-23 and \$40,500 in FY 2023-24 from the General Fund. Work to implement provider access to the All-Payer Claims Database will be performed by CIVHC at an hourly rate of \$225, with an estimated 623 hours of programming in FY 2022-23, and annual updates estimated at 180 hours in FY 2023-24 and ongoing.

### **Other Budget Impacts**

**General Fund reserve.** Under current law, an amount equal to 15 percent of General Fund appropriations must be set aside in the General Fund statutory reserve beginning in FY 2022-23. Based on this fiscal note, the bill is expected to increase the amount of General Fund held in reserve by \$21,026 in FY 2022-23 and \$6,075 in FY 2023-24, which will decrease the amount of General Fund available for other purposes.

#### **Effective Date**

The bill takes effect upon signature of the Governor, or upon becoming law without his signature.

### **State Appropriations**

For FY 2022-23, the Department of Health Care Policy and Financing requires an appropriation of \$140,175 from the General Fund.

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#### **State and Local Government Contacts**

Health Care Policy and Financing

Information Technology

Regulatory Agencies